

EXHIBIT I- PROJECT COMPLIANCE REQUIREMENTS AND DOCUMENTATION

Project: Sherwin Williams HQ Pavilion

The requirements listed below are **MANDATORY** for all subcontractors and lower tier subcontractors.
Fillable forms are attached for your use per section.

1. Certified Payroll (Weekly Reporting)

A. Initial Set-Up Sheet

1. All subcontractors are required to submit weekly certified payrolls into the LCPtracker reporting system (Electronic Certified Payroll Reporting System) as soon as you are set up by Marous Brothers Construction.
2. All requested information on the initial setup sheet (included in this exhibit), must be completed in its entirety. The information is needed for setup. This applies to all lower tier subcontractors and/or suppliers.

2. Apprenticeship Certificates

- ##### **A.**
- If there are any apprentices reported on certified payrolls, an Apprenticeship Certificate for that individual must be uploaded into LCPtracker.

3. OCIP Wrap Up Reporting

- ##### **A.**
- Payroll reports should be sent to tpolachek@marousbrothers.com within two weeks following the end of the prior month, no later than the 5th of each month (this allows 5 days to review and submit by the 10th).

4. Daily Sign-In / Sign-Out Sheets (Weekly Reporting)

- ##### **A.**
- Subcontractors must complete an *Employee Daily Sign-In / Sign-Out* sheet on a daily basis.
- ##### **B.**
- Daily Sign-In / Sign-Out Sheets are to be submitted weekly via email to Tabitha Polachek at tpolachek@marousbrothers.com. Keep a copy for your records. If not received, your payroll will not be reviewed.

5. B2Gnow Payment Confirmation (Monthly Reporting)

- ##### **A.**
- All subcontractors, lower tier subcontractors, and suppliers on the project must confirm payments received on the project monthly.
- ##### **B.**
- If you have lower tier subcontractors/suppliers, you are responsible to enter all payments made to them and ensure that they confirm the payments that you reported. The monthly audits cannot be closed until this is done.

6. Project Diversity Requirements

A. *Contractual*

- 1) 15% MBE
- 2) 7% FBE
- 3) 8% CSB

B. *Work Force*

- 1) 20% Cleveland Residence
- 2) 16% Minority
- 3) 7% Female

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Please submit payrolls weekly so that we can review and advise of any issues requiring correction before we submit our monthly billing. If the subcontractor or any of the lower tier subcontractors do not submit all required documents in a timely manner, we may opt to pull them from the monthly billing until all required documents are submitted.

Please direct any questions regarding Compliance requirements to:

Tabitha Polachek, Compliance Manager
440-391-5427
tpolachek@marousbrothers.com

Initial Set-Up Sheet

Company Name: _____

Subcontractor to: _____

Company Type (LLC, Corporation, etc.) _____

Owners Race & Gender: _____

Federal tax ID number: _____

Owners Name: _____

Main Company Email: _____

Contract Amount: \$ _____

Union/Non-Union: _____

Contractor license number or 10 digit phone number: _____

Phone number: _____

Fax number: _____

Please Circle All City of Cleveland Certifications that Apply: ☐ CSB ☐ FBE ☐ MBE ☐ Section 3

Company Address, city, state, zip code (No P.O. Box Numbers):

Compliance Contact Person Name & Email (correspondence will be sent to this address):

Project Name

Work Description/Scope of Work

Award Date

Work Start Date

Work End Date

**The Sherwin-Williams Company
Building Our Future R & D Project**

Wrap Up Monthly Payroll Report Form

This form should be completed by the 10th of the month

Subcontractor/ Lower-Tier Subcontractor Information

Company Name: _____

Sub Of: _____

Final Payroll: Y/N _____

Payroll Month _____

Year 20 _____

Contract # _____

(if applicable) _____

Classification	Class Code	On-Site Payroll Amount	On-Site Hours

- ❖ Earnings for overtime should be included only at straight time hourly rates. Overtime HOURS should be shown but do not include the extra wages paid for Overtime hours.
- ❖ On-Site Payroll \$: should only include the unburdened wages (the same as your “normal” insurance payroll reporting).

I CERTIFY THAT THE INFORMATION REPORTED ABOVE IS TRUE, ACCURATE AND COMPLETE. NOT REPORTING PAYROLL INFORMATION COULD AFFECT YOUR EXPERIENCE MODIFICATION RATING WITH THE APPLICABLE WORKERS' COMPENSATION INSURANCE RATING BUREAU(s).

Signature

Date

Printed Name

Title

This form is to be submitted via fax/email:

Wrap Up Insurance Solutions

Attention: Leslie Cassert, Program Administrator
16100 Swingley Ridge Road, Suite 250
St. Louis, MO 63017
(636) 449-1594 / Email: lcassert@wrapupsolutions.com

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